

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT** ▼Example: If typing, type  
over the lines

Louisiana Reform PAC

ADDRESS (number and street)

PO Box 1542

☐Check if different  
than previously  
reported. (ACC)

Shreveport

LA

71165

1542

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00409631

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☒July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2008

through

06

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

John Schmidt

Signature of Treasurer

Electronically Filed by John Schmidt

Date

07

15

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Louisiana Reform PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		16187.78
(b) Cash on Hand at Beginning of Reporting Period .....	10588.65	
(c) Total Receipts (from Line 19) .....	38634.49	55268.98
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	49223.14	71456.76
7. Total Disbursements (from Line 31) .....	36305.82	58539.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	12917.32	12917.32
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
Louisiana Reform PAC

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	25000.00	41000.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1000.00	1000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	26000.00	42000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	12000.00	12000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	38000.00	54000.00
12. Transfers From Affiliated/Other Party Committees .....	.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	634.49
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	634.49	634.49
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	38634.49	55268.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	38634.49	55268.98

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	26305.82	48039.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	26305.82	48039.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	36305.82	58539.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36305.82	58539.44

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	38000.00	54000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	38000.00	54000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	26305.82	48039.44
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	634.49
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	26305.82	47404.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)

Dieter Hugel, Sr.

Mailing Address 2626 N Arnoult Road  
Suite 300

City State Zip Code  
 Metairie LA 70002-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gulf Coast MarineOccupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 9 / 2 0 0 8

Transaction ID: SA11AI-349-525-c

Amount of Each Receipt this Period

5000.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)

Allen Dickson

Mailing Address PO Box 5845

City State Zip Code  
 Shreveport LA 71135-5845

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morris Dickson LLCOccupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI-158-527-c

Amount of Each Receipt this Period

5000.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)

Paul Dickson

Mailing Address PO Box 51367

City State Zip Code  
 Shreveport LA 71135-1367

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morris& Dickson LLCOccupation  
Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI-154-526-c

Amount of Each Receipt this Period

5000.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) .....

15000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

**A.**

Full Name (Last, First, Middle Initial)

John Georges

Mailing Address 23 Audubon Place

City

New Orleans

State

LA

Zip Code

70118-5525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Imperial Trading Company

Occupation

President, CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI-347-522-c

Amount of Each Receipt this Period

5000.00

PAC Contribution

**B.**

Full Name (Last, First, Middle Initial)

Charlene Goszycynski

Mailing Address 2626 N Arnoult Road  
Suite 300

City

Metairie

State

LA

Zip Code

70002-5959

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gulf Coast Marine

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: SA11AI-348-524-c

Amount of Each Receipt this Period

5000.00

PAC Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

25000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

**A.**

Full Name (Last, First, Middle Initial)

BluePAC

Mailing Address 1310 G Street NW

City

Washington

State

DC

Zip Code

20005-3000

FEC ID number of contributing  
federal political committee.

**C** C00194746

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 8

Transaction ID: SA11C-346-521-c

Amount of Each Receipt this Period

1000.00

PAC Contribution

**B.**

Full Name (Last, First, Middle Initial)

WAL-PAC Committe for Responsible Government

Mailing Address 701 8th Street NW  
Suite 200

City

Washington

State

DC

Zip Code

20001-3917

FEC ID number of contributing  
federal political committee.

**C** C00093054

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 7 / 2 0 0 8

Transaction ID: SA11C-358-532-c

Amount of Each Receipt this Period

5000.00

PAC Contribution

**C.**

Full Name (Last, First, Middle Initial)

Employees of Northrop Grumman Corporation PAC (ENGPAC)

Mailing Address 520 S Grand Avenue  
Suite 700

City

Los Angeles

State

CA

Zip Code

90071-2665

FEC ID number of contributing  
federal political committee.

**C** C00088591

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11C-104-523-c

Amount of Each Receipt this Period

1000.00

PAC Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 16

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

**A.**

Full Name (Last, First, Middle Initial)

AT&amp;T Federal PAC

Mailing Address 175 E Houston Street  
Room 7-A

City	State	Zip Code
San Antonio	TX	78205-2255

FEC ID number of contributing  
federal political committee.**C** C00109017

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	0	8

Transaction ID: SA11C-279-530-c

Amount of Each Receipt this Period

5000.00

PAC Contributions

SUBTOTAL of Receipts This Page (optional) .....

5000.00

TOTAL This Period (last page this line number only) .....

12000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 16

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Louisiana Reform PAC

**A.**

Full Name (Last, First, Middle Initial)

Bestbuy

Mailing Address PO Box 9312

City

Minneapolis

State

MN

Zip Code

55440-9312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

634.49

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 0 8

Transaction ID: SA17-339-561-m

Amount of Each Receipt this Period

634.49

Refund for Computer Equip-  
ment

**SUBTOTAL** of Receipts This Page (optional) .....

634.49

**TOTAL** This Period (last page this line number only) .....

634.49

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Louisiana Reform PAC

A.

Full Name (Last, First, Middle Initial)  
CompleteCampaigns.com

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement  
Monthly Software Maint

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-164-533-e  
Date of Disbursement

04 / 03 / 2008

Amount of Each Disbursement this Period

350.00

B.

Full Name (Last, First, Middle Initial)  
Courtney Guastella

Mailing Address 7449 Garfield Street

City New Orleans State LA Zip Code 70118-3636

Purpose of Disbursement  
Monthly Retainer Fee-no candidate benefitted

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-103-548-e  
Date of Disbursement

06 / 06 / 2008

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)  
Monica Schmidt

Mailing Address 10010 Winding Ridge Drive

City Shreveport State LA Zip Code 71106-7684

Purpose of Disbursement  
Monthly Admin Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-165-545-e  
Date of Disbursement

05 / 09 / 2008

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) .....

3100.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Louisiana Reform PAC

**A.**

Full Name (Last, First, Middle Initial)  
Monica Schmidt

Mailing Address 10010 Winding Ridge Drive

City Shreveport State LA Zip Code 71106-7684

Purpose of Disbursement  
Monthly Admin Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-165-546-e  
Date of Disbursement

06 / 06 / 2008

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Wendy Vitter

Mailing Address 238 Helios Avenue

City Metairie State LA Zip Code 70005-3755

Purpose of Disbursement  
PAC Expenses-no candidate benefitted

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-124-549-e  
Date of Disbursement

06 / 10 / 2008

Amount of Each Disbursement this Period

811.68

**C.**

Full Name (Last, First, Middle Initial)  
Bestbuy

Mailing Address PO Box 9312

City Minneapolis State MN Zip Code 55440-9312

Purpose of Disbursement  
Computer Equipment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B-339-535-e  
Date of Disbursement

04 / 23 / 2008

Amount of Each Disbursement this Period

661.98

**SUBTOTAL** of Disbursements This Page (optional) .....

1723.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Louisiana Reform PAC

**A.**

Full Name (Last, First, Middle Initial)  
Courtney Guastella

Mailing Address 7449 Garfield Street

City State Zip Code  
New Orleans LA 70118-3636

Purpose of Disbursement  
Monthly Retainer Fee-no candidate benefitted  
Candidate Name

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
Other (specify) ▼  
State: District:

Transaction ID: SB21B-103-544-e  
Date of Disbursement

05 / 09 / 2008

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Courtney Guastella

Mailing Address 7449 Garfield Street

City State Zip Code  
New Orleans LA 70118-3636

Purpose of Disbursement  
Monthly Retainer fee-no candidate benefitted  
Candidate Name

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
Other (specify) ▼  
State: District:

Transaction ID: SB21B-103-537-e  
Date of Disbursement

04 / 02 / 2008

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
CompleteCampaigns.com

Mailing Address 610 Gateway Center Way  
Suite K

City State Zip Code  
San Diego CA 92102-4548

Purpose of Disbursement  
Monthly Software Fee  
Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
Other (specify) ▼  
State: District:

Transaction ID: SB21B-164-553-e  
Date of Disbursement

06 / 05 / 2008

Amount of Each Disbursement this Period

320.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5320.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Louisiana Reform PAC

<b>A.</b> Full Name (Last, First, Middle Initial) The Fletcher Group Mailing Address 321 N 2nd Street	<b>Transaction ID:</b> SB21B-359-534-e <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 7 / 2 0 0 8</div> </div>
City Monroe State LA Zip Code 71201-6725 Purpose of Disbursement Consulting Fees-no candidate benefitted Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>10000.00</div> <div>003</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) CompleteCampaigns.com Mailing Address 610 Gateway Center Way Suite K City San Diego State CA Zip Code 92102-4548 Purpose of Disbursement Monthly Software Maint Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-164-540-e <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>350.00</div> <div>001</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) US Airways, Inc. Mailing Address 111 W Rio Salado Parkway City Tempe State AZ Zip Code 85281-2880 Purpose of Disbursement Travel: Airfare to New York Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B-167-551-e <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>344.50</div> <div>002</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

10694.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Louisiana Reform PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Monica Schmidt	<b>Transaction ID:</b> SB21B-165-538-e <b>Date of Disbursement</b>																				
Mailing Address 10010 Winding Ridge Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	2		2	0	0	8												
City Shreveport State LA Zip Code 71106-7684	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Monthly Admin Fee Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Monica Schmidt	<b>Transaction ID:</b> SB21B-165-547-e <b>Date of Disbursement</b>																				
Mailing Address 10010 Winding Ridge Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	0		2	0	0	8												
City Shreveport State LA Zip Code 71106-7684	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Postage for Fedex Candidate Name	<table border="1"> <tr> <td colspan="10">17.22</td> </tr> </table>	17.22																			
17.22																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) The Fletcher Group	<b>Transaction ID:</b> SB21B-359-543-e <b>Date of Disbursement</b>																				
Mailing Address 321 N 2nd Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	8		2	0	0	8												
City Monroe State LA Zip Code 71201-6725	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Consulting Fees-no candidate benefitted Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

5267.22

**TOTAL** This Period (last page this line number only) .....

26105.38

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Louisiana Reform PAC

**A.** Full Name (Last, First, Middle Initial)  
John Kennedy for US Senate, Inc.

Mailing Address PO Box 14861

City State Zip Code  
Baton Rouge LA 70898-4861

Purpose of Disbursement  
Political Contribution

Candidate Name  
John Kennedy

**011**  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: LA District:

**Transaction ID:** SB23-361-555-e  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
John Kennedy for US Senate, Inc.

Mailing Address PO Box 14861

City State Zip Code  
Baton Rouge LA 70898-4861

Purpose of Disbursement  
Political Contribution

Candidate Name  
John Kennedy

**011**  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District:

**Transaction ID:** SB23-361-554-e  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

10000.00